SCHEDULE B (FEC Form 3)

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:			PAGE	266 O	F 2	269
	(check only one)						
		17	18		19a		19b
	X	20a	20b		20c		21
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ITEMIZED DISBURSEMENTS Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Brynne Kennedy for Congress Full Name (Last, First, Middle Initial) Date of Disbursement A. Waxman, Anita, , , 2020 Mailing Address 160 W 66Th St 10 08 Apt 28B City State Zip Code **FEC Identification Number** NY New York 10023-6560 Purpose of Disbursement Contribution Refund Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: 2020 100.00 Office Sought: House Senate Primary ✗ General Transaction ID: 500519117 Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) Date of Disbursement В. Mailing Address City State Zip Code **FEC Identification Number** Purpose of Disbursement Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: Office Sought: House Senate Primary General Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) Date of Disbursement C. Mailing Address City State Zip Code **FEC Identification Number** Purpose of Disbursement Candidate Name Amount of Each Disbursement this Period Category/ Type Office Sought: Disbursement For: House Senate General Primary President Other (specify) Memo Item State: District:

100.00

826.00